Statistical Bulletin
METROPOLITAN LIFE INSURANCE COMPANY

Volume 42 May 1961

Marriages in the United States and Canada

In 1960, as in the year before, the number of marriages in the United States increased somewhat. There were about 1,528,000 marriages during the year, compared with 1,506,000 in 1959 and 1,465,000 in 1958. The number in 1960 corresponds to a rate of 8.5 per 1,000 population (including the Armed Forces overseas). In Canada, approximately 132,000 marriages were recorded in 1960, or about the same number as in each of the preceding two years. However, the marriage rate last year—7.4 per 1,000—was the lowest since 1936.

A rise in marriages for 1960 was reported in most areas of the United States, as may be seen in Table 1 on the next page. Only in Idaho and Louisiana, however, were the increases as much as 10 percent. In the new States of Alaska and Hawaii the increases exceeded 5 percent. The gains last year were also well above the national average in Utah, Wyoming, and North Carolina.

In contrast, 12 States experienced moderate decreases between 1959 and 1960. The largest decline —almost 6 percent—occurred in North Dakota. Five other States in the North Central region likewise reported fewer marriages in 1960 than in the preceding year. Outside this region appreciable decreases were recorded in Montana, Oklahoma, and Kentucky.

In the large cities, as a group, the rise in marriages last year, 1.4 percent, was virtually the same as that for the United States as a whole. Of the 104 cities with at least 100,000 population in 1950, almost three fifths reported an increase in marriages in 1960. Gary led in this respect with a rise of 12 percent. Jacksonville and Sacramento recorded increases of 11 percent; in Dallas the rise was nearly as great. Contrary to the general uptrend, 44 of the major urban areas reported decreases in marriages during 1960; the largest declines, ranging from 7 to 9 percent, occurred in Fall River, Scranton, Corpus Christi, Louisville, and Paterson.

Among the cities with at least 1,000,000 population, Philadelphia alone reported a decrease in marriages in 1960, the number falling

TABLE 1—MARRIAGES IN THE UNITED STATES BY GEOGRAPHIC AREA, 1958-1960

Area of Occurrence	Number			Percent Change†	
	1960*	1959	1958	1958 to 1960	1958 to 1959
UNITED STATES	1,528,017	1,505,878	1,464,644	1.5	2.8
New England	77,013	75,027	74,043	2.6	1.3
Maine	7,854	7,599	7,564	3.4	.5
New Hampshire	7,323	7,287	6,997	.5	4.1
Vermont	3,242	3,232	3,371	.3	— 4.1
Massachusetts	34,900	33,630	33,449	3.8	.5
Rhode Island	5,817	5,770	5,659	.8	2.0
Connecticut	17,877	17,509	17,003	2.1	3.0
Middle Atlantic	235,902	230,895	226,923	2.2	1.8
New York	122,811	120,517	121,322	1.9	— .7
New Jersey	39,820	38,659	38,398	3.0	.7
Pennsylvania	73,271	71,719	67,203	2.2	6.7
East North Central	280,424	279,603	267,733	.3	4.4
Ohio	66,394	66,877	65,240	— .7	2.5
Indiana	41,685	40,982	38,949	1.7	5.2
Illinois	88,029	87,281	83,400	.9	4.7
Michigan	59,743	58,826	55,159	1.6	6.6
Wisconsin	24,573	25,637	24,985	— 4.2	2.6
West North Central	120,554	120,612	116,036	‡	3.9
Minnesota	23,596	23,188	23,554	1.8	— 1.6
Iowa	24,774	25,116	23,958	— 1.4	4.8
Missouri	35,800	35,400	32,500	1.1	8.9
North Dakota	4,038	4,283	4,275	— 5.7	.2
South Dakota	5,887	5,861	5,702	.4	2.8
Nebraska	10,635	10,724	10,607	— .8	1.1
Kansas	15,824	16,040	15,440	— 1.3	3.9
South Atlantic	263,024	258,159	247,567	1.9	4.3
Delaware	2,394	2,383	2,311	.5	3.1
Maryland	40,320	39,770	39,926	1.4	— .4
District of Columbia	8,600	8,377	8,094	2.7	3.5
Virginia	37,519	37,768	36,326	— .7	4.0
West Virginia	13,800	13,700	14,000	.7	— 2.1
North Carolina	31,691	29,984	27,266	5.7	10.0
South Carolina	40,007	38,661	37,856	3.5	2.1
Georgia	49,378	48,928	47,219	.9	3.6
Florida	39,315	38,588	34,569	1.9	11.6
East South Central	110,642	109,202	114,787	1.3	— 4.9
Kentucky	26,759	27,820	26,204	— 3.8	6.2
Tennessee	30,763	30,213	27,675	1.8	9.2
Alabama	31,887	30,722	24,506	3.8	25.4
Mississippi	21,233	20,447	36,402	3.8	—43.8
West South Central	163,272	163,036	159,958	.1	1.9
Arkansas	18,703	18,543	15,600	.9	18.9
Louisiana	23,523	21,453	21,068	9.6	1.8
Oklahoma	28,731	30,170	33,466	— 4.8	— 9.8
Texas	92,315	92,870	89,824	— .6	3.4
Mountain	126,940	124,075	117,947	2.3	5.2
Montana	5,883	6,228	6,142	— 5.5	1.4
Idaho	10,325	9,343	9,522	10.5	— 1.9
Wyoming	3,267	3,077	2,955	6.2	4.1
Colorado	15,901	15,497	14,691	2.6	5.5
New Mexico	12,300	12,580	12,400	— 2.2	1.5
Arizona	10,293	10,251	9,805	.4	4.5
Utah	7,198	6,734	6,600	6.9	2.0
Nevada	61,773	60,365	55,832	2.3	8.1
Pacific	150,246	145,269	139,650	3.4	4.0
Alaska	1,861	1,767	1,616	5.3	9.3
Washington	27,206	27,064	27,377	.5	— 1.1
Oregon	10,590	10,166	9,896	4.2	2.7
California	105,352	101,314	96,034	4.0	5.5
Hawaii	5,237	4,958	4,727	5.6	4.9

*Provisional. †Minus sign (—) denotes decrease. ‡Less than 0.05 percent.

Source of basic data: Reports by the National Office of Vital Statistics, and surveys by the Statistical Bureau of the Metropolitan Life Insurance Company.

3.5 percent. On the other hand, marriages increased almost 9 percent in the Los Angeles area and approximately 2 percent in and about Chicago and Detroit. In New York City they increased 0.4 percent—from 66,887 in 1959 to 67,133 in 1960.

The five popular marriage centers in the United States recorded only small changes. Las Vegas, Reno, and Miami showed increases of up to 3 percent; in Yuma and Elkton marriages were off by 2 and 0.4 percent, respectively.

A majority of the Provinces in Canada had fewer marriages in 1960 than in 1959, as Table 2 shows. The largest decreases occurred in British Columbia (8 percent) and Ontario (5 percent). In Quebec, on the other hand, marriages increased by 8 percent, from 37,124 in 1959 to about 40,000 in 1960. Upswings of at least that magnitude also occurred in two other Provinces—Newfoundland and Prince Edward Island.

In both the United States and Canada, the marriage rate in the past few years has been depressed somewhat by the recession in business conditions. As the economy recovers, it is likely that the rate will take an upturn in the two countries. Moreover, the annual number of marriages is expected to climb to new highs in the late 1960's, when record numbers of persons will be attaining adult age.

●

TABLE 2—MARRIAGES IN CANADA BY PROVINCE, 1958-1960

Area of Residence	Number			Percent Change†	
	1960*	1959	1958	1959 to 1960	1958 to 1959
CANADA	132,000	132,474	131,525	— 0.4	0.7
Newfoundland	3,220	2,893	3,047	11.3	—5.1
Prince Edward Island	690	639	619	8.0	3.2
Nova Scotia	5,130	5,310	5,135	— 3.4	3.4
New Brunswick	4,410	4,310	4,170	2.3	3.4
Quebec	40,180	37,124	36,229	8.2	2.5
Ontario	44,270	46,598	46,894	— 5.0	— .6
Manitoba	6,490	6,661	6,430	— 2.6	3.6
Saskatchewan	6,090	6,388	6,464	— 4.7	—1.2
Alberta	10,280	10,402	10,186	— 1.2	2.1
British Columbia	10,980	11,910	12,094	— 7.8	—1.5
Yukon and Northwest Territories	260	239	257	8.8	—7.0

*Provisional. †Minus sign (—) denotes decrease.

Source of basic data: Various reports from the Dominion Bureau of Statistics; the 1960 figures for Provinces were estimated by the Statistical Bureau of the Metropolitan Life Insurance Company.

Trends In Blood Pressure of Individuals

It has been found in numerous studies, including the Build and Blood Pressure Study, 1959, by the Society of Actuaries, that average blood pressures show an increase with age.* Averages for groups, however, give no indication of the changes in blood pressure level which may occur in individuals with advance in age. The present report provides information which bears on the trend of such changes.

This report presents the findings of a special study on male applicants for Life insurance in the Metropolitan Life Insurance Company during the period 1958-60 for whom previous blood pressure determinations were available from medical examinations for insurance in the Company at least five years earlier; in some cases the interval was 20 years or more.

Before presenting the results of this study, certain facts with regard to blood pressure measurements generally, and to Life insurance practice particularly, should be considered. In addition, readings are influenced by many extraneous factors that may be of no significance. Blood pressure readings tend generally to be reported in rounded figures, primarily with digits ending in zero and secondarily with digits ending in even numbers or 5's. Furthermore, little attention may be paid to variations in readings if they are within a reasonable range about the average—this range, in fact, is larger than the increase in average pressures with age. The higher blood pressures are probably underrepresented inasmuch as persons with established hypertension—particularly those previously rejected or rated for that reason—would be less likely to apply for Life insurance.

Another consideration is a long-term downward trend in reported blood pressure readings. Evidence of such trend is found in a comparison of the average blood pressures as recorded in the Build and Blood Pressure Study, 1959, with those in a study made in 1925. The decrease in average systolic pressure ranged from less than 2 mm. at the younger ages to about 4 mm. at the older ages; the average diastolic pressure showed a decrease of about 6 or 7 mm.† There are a number of reasons for this recorded downward trend in blood pressure: an increased tendency to report so-called basic pressures, taken when the individual is relaxed, or to report the lowest reading if only one is reported; the judgment of the examining physician as to the true

*See "Blood Pressures Among Men and Women," *Statistical Bulletin*, June 1960.

†The greater decrease in the diastolic than in the systolic pressures may reflect, in part, a change in the timing of diastolic readings. Initially, these determinations were made at the fourth phase (auscultatory readings taken at the point of beginning diminution of sound). These readings average 4 or 5 mm. higher than those taken at the fifth phase (the point of complete cessation of sound). Although the readings for the early study were reportedly fifth phase, many may not have been.

blood pressure level for the individual; and the possibility that a few applicants prepared for the examination by measures that may have reduced their blood pressure, at least temporarily.

In the light of these circumstances, minor variations in blood pressures of individuals even over relatively long periods of time must be ignored. Valid conclusions can be drawn only from the general trends.

The accompanying table shows

●

LONG-TERM CHANGES IN BLOOD PRESSURE OF INDIVIDUALS

Percentage With Specified Degree of Change Between Recent Blood Pressure Readings And Readings Taken at Least Five Years Earlier*

Sample of Male Applicants for Life Insurance, Metropolitan Life Insurance Company, 1958-60

Change in Blood Pressure Readings, (mm.)	Age at Last Blood Pressure Reading						
	Ages 35-44		Ages 45-54			Ages 55-64	
	Years Elapsed Since Prior Reading*						
	5-9	10-19	5-9	10-19	20 or More	10-19	20 or More
	Systolic Pressure: Percent of Applicants With Specified Change						
Decrease							
5 or more	24	24	32	22	18	5	14
Stationary							
−4 to +4	35	34	30	29	28	32	24
Increase							
5 or more	41	42	38	50	54	64	62
5 to 9	13	16	14	11	18	14	14
10 to 14	12	12	15	15	20	18	17
15 to 24	11	9	6	15	16	18	17
25 and over	5	5	3	8	—	14	14
	Diastolic Pressure: Percent of Applicants With Specified Change						
Decrease							
5 or more	22	23	26	20	24	23	34
Stationary							
−4 to +4	40	39	50	33	42	36	28
Increase							
5 or more	38	38	24	47	34	41	38
5 to 9	19	14	6	16	12	14	7
10 to 14	11	12	11	19	14	18	17
15 and over	8	11	8	12	8	9	14
Number of Applicants	210	306	66	133	50	22	29

*Earliest set of readings available. Averages used in cases with multiple readings.

the proportions of male applicants with blood pressure readings taken in 1958-60 classified according to the amount of change since the earliest reading available, the interval being at least five years. In the great majority of these cases, blood pressures varied little from the average for their age. The cases in which there was some increase in blood pressure outnumber those in which there was a decrease. The amount of the increase varied with a number of factors, but especially with the level of the blood pressure. Analysis of cases with systolic pressures of 140 mm. or more and diastolic pressures of 90 mm. or more showed that the greater increases were associated primarily with recent readings well above average.*

The degree of increase in blood pressure tended to rise also with advance in age and with length of time elapsed between the two sets of readings. Thus, men at ages 35-44 with recent systolic pressures 10 or more mm. in excess of the readings 10-19 years earlier comprised about one fourth of all cases at these ages; for men at ages 55-64, the comparable proportion was one half. As expected, large increases in diastolic pressure were less frequent.

The findings in this study indicate that in most adults blood pressure remains relatively stable for considerable periods of time.† Accordingly, it may be inferred that the increase in average blood pressure with age represents mainly the net effect of fairly rapid increases in a minority of individuals and a stationary level (or even some decrease) in the majority. These data, however, cannot show conclusively whether this situation holds for more extended periods. Nevertheless, they do indicate that the proportion of cases in which significant increases in blood pressure occur rises as time goes on, and that the chances of developing true hypertension are greater for persons with blood pressure slightly or moderately above average than for those with low or average pressure.

*These figures are not shown in the table because this aspect of the analysis is based partly on a supplementary group which could not properly be combined with the data included in the table.

†This is in accord with other studies based on different approaches, e.g., Thomson, K. J., "Some Observations on the Development and Course of Hypertensive Vascular Disease," *Proceedings 38th Annual Meeting, Medical Section, American Life Convention*, pp. 85-112, June 15-17, 1950.

Large Accident Toll in the Vacation Season

ACCIDENTS take a heavy toll of life throughout the year but the number is especially large during the usual vacation season—June through August. During this three-month period each year, about 25,000 people in the United States are killed in accidents of various types, an average of about 270 a day. The unfavorable record for these summer months reflects to an appreciable extent the increase

in drownings resulting from the greater participation in recreational activities, such as swimming, playing in and near the water, and boating. The monthly variation in deaths from specified types of accidents in the United States is shown in the table below; the figures relate to the years 1957-58, the latest period for which such data are available.

The incidence of motor vehicle accident fatalities is considerably higher in the summer than in the earlier months of the year—a consequence, in part at least, of the greater amount of automobile travel during the vacation period. The toll varies within the summer period; in 1957-58 it ranged from an average of 103 deaths a day in July to 116 a day in August, which compared with an average of 88 fatalities a day in February and March. The entire increase in motor vehicle accident mortality in the summer represents the added number of deaths among drivers and passengers. Accidents involving pedestrians are at a low level during this season, when the hours of daylight are greatest.

With the advent of warmer weather, drownings in the United States rise rapidly in frequency and become a major accident hazard. In 1957-58, drownings, exclusive of those in water transport, took a daily average of 31 lives in June with a peak of 35 in July. These fatalities accounted for about one eighth of the total accident mortality in those two months. The mortality from water transport accidents—mainly drownings in small boat mishaps—likewise is

TABLE 1—MONTHLY VARIATION IN DEATHS FROM SPECIFIED TYPES OF ACCIDENTS
United States, 1957-58

Type of Accident	Average Number of Deaths Per Day												
	Year	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Accidents—Total	255	246	247	229	234	245	273	268	266	247	257	266	279
Motor vehicle	104	90	88	88	92	97	106	103	116	112	114	119	119
Pedestrian	20	20	18	17	18	16	18	18	18	20	22	25	27
Falls	53	58	56	54	50	51	50	52	50	51	56	53	57
One level to another	17	16	15	15	16	17	18	20	18	18	20	17	18
Drowning*	14	4	6	6	13	21	31	35	24	12	6	5	5
Water transport	4	2	2	3	6	7	8	7	7	4	3	3	2
Machinery	5	4	3	4	6	6	6	6	6	7	7	5	3
Electric current	3	1	2	2	2	3	5	5	4	4	2	2	1

*Excludes water transport.
Source: Various reports of the National Office of Vital Statistics.

TABLE 2—INCIDENCE OF NONFATAL INJURIES AND ASSOCIATED DISABILITY
By Quarterly Periods, United States, 1959

Quarter	Number in Thousands		
	Injuries*	Days of Restricted Activity	Days of Bed Disability
January–March	9,986	59,985	17,662
April–June	12,941	58,219	17,263
July–September	13,751	63,844	19,402
October–December	9,992	59,720	14,525

*Only those involving either medical attention or restricted activity in the noninstitutional civilian population. Included are injuries of other than accidental origin.

Source: U. S. National Health Survey, Series B—No. 24.

most prominent during the vacation season.

The summer rise in fatal injuries results not only from greater participation in sports and recreation but also from increased occupational activity. The frequency of machinery accidents, for example, begins to rise in the spring and reaches a peak in the summer and early autumn, paralleling the greater use of tractors and other outdoor mechanical equipment. Similarly, fatal injuries due to electric current show a marked upswing in the summer, mainly because of the greater amount of outdoor work which brings men into contact with electric lines.

Lightning (not shown in the table) is another summer hazard. Although the mortality from this cause has been greatly reduced, there are still from 100 to nearly 200 victims annually — a greater loss of life than from tornadoes or floods in most years.

The mortality from accidental falls as a whole varies but little from one season to another, but falls from one level to another are appreciably more frequent in the summer than in the spring or winter. This increase is associated with the greater incidence of falls out of windows and off roofs, trees, and cliffs, and with a greater number of diving accidents — these being classified as falls.

Data on the seasonal incidence of nonfatal injuries and on the associated disability are available from the current U. S. National Health Survey, which collects its facts in household interviews; the figures thus relate to the noninstitutional civilian population. It is apparent from Table 2 that both the number of injuries and the amount of disability are at a peak during the

third quarter of the year. In the July-September period of 1959, there occurred about 13¾ million injuries involving either medical attention or restriction of activity. Such injuries accounted for nearly 64 million days of restricted activity and for more than 19 million days of bed disability in that quarter of the year.

The Causes of Premature Death

DESPITE the notable achievements in life conservation, particularly at the younger ages, the incidence of premature death in the United States is still high. Currently, about 575,000 deaths a year—more than a third of the annual total—are at the ages under 65, exclusive of the toll in infancy.*

Premature death is considerably more frequent among males than among females, as the table on page 10 shows. In 1958, the mortality rate in the age range 1-64 years was 4.8 per 1,000 among males and 2.7 among females, a ratio of about 1¾ to 1. The widest disparity in mortality occurred at ages 15-24, where the rate for males was 2½ times that for females. At these ages the rate among males—1.5 per 1,000—was about twice that at 1-14 years, whereas among females the rate was 0.6 per 1,000 in both age groups.

Accidents predominate as a cause of death among children and young adults. Among males, 2 out of every 5 deaths at ages 1-14 and 3 out of every 5 at ages 15-24 result from accidental injury. The toll is not as large among females; accidents account for about 30 percent of their total mortality under age 25. In each sex, motor vehicles are responsible for somewhat over one third of the fatal injuries at 1-14 years and for about two thirds of those at ages 15-24.

It is not generally realized that cancer (malignant neoplasms) ranks second as a cause of death in childhood and early adult life. Over one tenth of all deaths at ages 1-24 are due to malignancies, leukemia being the leading type. Other diseases causing a considerable number of deaths at these ages are pneumonia and influenza, the cardiovascular-renal diseases, and congenital malformations.

At ages 25-44, the majority of deaths result from the cardiovascular-renal diseases, cancer, and accidents, but these causes account for different proportions of the total mortality in the two sexes. Among males, the cardiovascular-renal diseases comprise nearly one third of the total mortality in this age group; heart disease alone is responsible for practically one

*The mortality in the first year of life is omitted because it is associated largely with pathological conditions existing before birth or with the hazards of the birth process, and hence differs greatly from that at the other periods of life. Infant deaths number about 112,000 annually.

fourth of the total, or for about the same proportion as accidents. Cancer causes nearly one eighth of the deaths among men 25-44 years. In contrast, among women at these ages cancer is the leading cause of death, accounting for somewhat over one fourth of the mortality from all causes combined. This is nearly twice the proportion of deaths from heart disease, and about 3 times the toll from accidental injuries.

More than 400,000 deaths a year in the United States are among people in the age group 45-64 years. At least half of these deaths are due to cardiovascular-renal conditions, the bulk of them being attributed to heart disease. In 1958, heart disease accounted for 45 percent of the total mortality among men and for 33 percent of the total among women at ages 45-64. Cancer ranks second at a cause of death in each sex but, as in the ages prior to midlife, malignancies are responsible for a larger proportion of the mortality among women than among men.

●

MORTALITY AT AGES UNDER 65* BY CAUSE AND SEX
United States, 1958

Cause of Death	Males, at Ages					Females, at Ages				
	1-64 Years	1-14	15-24	25-44	45-64	1-64 Years	1-14	15-24	25-44	45-64
All Causes										
Number of deaths	365,205	18,985	17,261	64,407	264,552	209,859	14,113	7,120	40,305	148,321
Death rate per 1,000	4.8	0.8	1.5	2.8	15.4	2.7	0.6	0.6	1.7	8.2
Percent distribution	100	100	100	100	100	100	100	100	100	100
Major cardiovascular-renal diseases	46	4	6	31	55	39	4	13	26	47
Vascular lesions, central nervous system	6	1	1	3	7	9	1	3	6	11
Heart disease	37	2	3	24	45	26	2	6	15	33
Malignant neoplasms	16	12	7	12	19	28	13	11	28	30
Digestive system	5	†	†	3	6	7	†	1	4	8
Respiratory system	5	†	†	2	6	1	†	†	1	1
Breast	†	—	—	†	†	6	†	†	7	7
Genital organs	1	†	1	1	1	7	†	1	8	7
Accidents	13	39	61	25	5	7	29	30	9	3
Motor vehicle	6	14	39	13	2	4	11	22	5	2
Pneumonia and influenza	3	9	2	3	2	3	11	4	3	2
All other causes	22	36	24	29	19	23	43	42	34	18

*Exclusive of deaths under age 1.
†Less than 0.5 percent.
Source of basic data: National Office of Vital Statistics, *Vital Statistics of the United States 1958, Vol. II.*

MORTALITY FROM SELECTED CAUSES

Industrial Policyholders, Metropolitan Life Insurance Company
April 1961

Cause of Death	Annual Rate per 100,000 Policyholders*				
	April		Year to Date		
	1961	1960	1961	1960	1959
All Causes	707.8	686.6	735.8	744.2	711.2
Tuberculosis (all forms)	5.3	5.9	6.0	6.3	6.0
Communicable diseases of childhood	0.2	0.2	0.1	0.2	0.2
Acute poliomyelitis	—	—	†	†	0.1
Malignant neoplasms	148.8	139.2	150.4	147.7	145.6
Digestive system	48.6	47.0	48.3	49.4	49.3
Respiratory system	26.1	21.2	24.4	21.9	22.2
Diabetes mellitus	17.2	17.3	16.3	17.8	15.4
Diseases of the cardiovascular-renal system	383.1	364.7	403.3	401.1	389.0
Vascular lesions, central nervous system	71.1	66.3	74.3	74.6	74.7
Diseases of heart	284.8	273.9	299.2	298.0	285.9
Chronic rheumatic heart disease	12.4	10.0	12.7	12.5	11.6
Arteriosclerotic and degenerative heart disease	228.6	219.7	241.4	238.3	227.7
Diseases of coronary arteries	128.5	129.1	140.7	138.3	136.0
Hypertension with heart disease	31.1	31.0	32.7	33.5	33.7
Other diseases of heart	12.7	13.1	12.6	13.7	12.9
Nephritis and nephrosis	7.2	5.6	7.0	7.4	7.7
Pneumonia and influenza	21.1	25.7	22.0	33.4	22.9
Complications of pregnancy, childbirth	0.9	0.7	0.9	0.6	0.9
Suicide	6.1	6.7	6.6	6.4	6.7
Homicide	3.5	3.0	3.0	3.2	2.8
Accidents—total	31.3	32.4	31.6	31.8	31.1
Motor vehicle	14.1	13.2	13.7	13.6	13.4
All other causes	90.3	90.8	95.6	95.7	90.5

*These death rates relate to persons insured under Weekly or Monthly premium-paying Industrial policies and Monthly premium-paying Ordinary policies for small amounts of insurance.
†Less than 0.05.
Note—Rates for 1960 and 1961 are provisional.

Correspondence relating to the BULLETIN may be addressed to:

The Editor
STATISTICAL BULLETIN
Metropolitan Life Insurance Company
1 Madison Avenue, New York 10, N. Y.

Please notify us promptly of any change of mailing address.

MORTALITY FROM ALL CAUSES

INDUSTRIAL POLICYHOLDERS - METROPOLITAN LIFE INSURANCE COMPANY

P.F.M.—Printed in U.S.A.—42001—(5-61)

STATISTICAL BULLETIN
1 Madison Avenue, New York 10, N. Y.
Return Postage Guaranteed

Bulk Rate
U. S. POSTAGE
Paid
Newark, N. J.
Permit No. 4315

Mr. Eugene B. Power
University Microfilms
313 N. First Street
Ann Arbor, Michigan

S13